PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)) D	Docket Number (Optional) 002566-3300	
In re Application of Timothy A MUSCROVE et al.							
6	Timothy A. MUSGROVE et al. Application Number Filed						
DEC 14 2005 E		10/659,740 September 11, 2003					
L' DEC ,	For CONTENT AGGREGATION METHOD AND					
3,		APPARATUS FOR ON-LINE PURCHASING SYSTEM Art Unit Examiner					
CAS IRAN		2167		Ja	Jack M. Choules		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
☐ One mont	Fee Small Entit (a)(1)) \$120 \$60				<u>se</u> \$		
▼ Two mont	ths (37 CFR 1.1	7(a)(2))	\$450	\$2	25	\$ <u>450.00</u>	
☐ Three mor	nths (37 CFR 1.	17(a)(3))	\$1020	\$5	10	\$	
☐ Four mont	ths (37 CFR 1.1	7(a)(4))	\$1590	\$7	95	\$	
☐ Five months (37 CFR 1.17(a)(5)) \$2160				\$10	080	\$	
☐ Applicant claims small entity status. See 37 CFR 1.27.							
☐ A check in the amount of the fee is enclosed.							
☐ Payment by credit card. Form PTO-2038 is attached.							
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.							
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to							
Deposit Account Number 19-2380 (002566-3300) . I have enclosed a duplicate copy of this sheet.							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
I am the ☐ applicant/inventor							
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).							
attorney or agent of record. Registration No. 43,143							
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34							
_ Dut	Way			De	cemi	per 14, 2005	
Signeture						Date	
Daniel S. Song (202 Typed or printed name) 585-8000 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Total offorms are submitted.							
CERTIFICATE OF MAILING OR TRANSMISSION							
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office (Fax No. (571) 273-8300) on the date shown below.							
Typed or printed name							
Signature					Date		